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United States Bankruptcy Court Western District of Virginia

IN RE:	Case No. 15-62078
Boyles, Eugene Robert & Boyles, Ida Louise	Chapter 13
Debtor(s)	

CHAPTER 13 PLAN AND RELATED MOTIONS

 [] the first Chapter 13 plan filed in this case. [X] a modified Plan that replaces the [] confirmed or [X] unconfirmed Plan dated January 13, 2 	016

Date and Time of Modified Plan Confirmation Hearing:

Place of Modified Plan Confirmation Hearing:

United States Bankruptcy Court, 1101 Court Street, Lynchburg, VA

The plan provisions modified by this filing are:

Paragraph 1- modified per IRS Claim #1 as amended; Paragraph 2- attorney's fees are reduced; Paragraph 1- Base Gross is increased

Creditors affected by this modification are:

IRS, pursuant to claim.

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$ 253,172.31

Total Non-Priority Unsecured Debt: \$ 37,732.58 per claims filed

Total Priority Debt: \$ 5,648.07 per claims filed Total Secured Debt: \$ 243,365.52 per claims filed

- 1. **Funding of Plan.** The debtor(s) propose to pay the Trustee the sum of \$ varies per month for 60 months. Other payments to the Trustee are as follows:
 - ¹ Funds received as of June 27, 2016 totalling \$4,200.00 followed by 18 payments of \$615.00 (beginning July 30, 2016) followed by 32 payments of \$764.00.

The total amount to be paid into the Plan is \$ 39,718.00.

- 2. Priority Creditors. The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$ 3,081.00 balance due of the total fee of \$ 3,200.00 concurrently with or prior to the payments to remaining creditors.

(a)	Th	e \$_	3,081.0	0 in	Debto	r(s)' at	torney	's fees	to be p	aid by t	he Cł	napter	: 13 T	rustee	are bro	ken o	down a	as follow
	(i)	\$	3,081.0)0 :]	Fees to	be app	roved,	or alre	eady ap	proved,	by th	ne Co	urt at	initial	plan c	onfiri	nation	1;
	(ii)	\$:	Additi	onal pr	e-conf	irmatio	on or po	ost-conf	irmat	tion fe	ees al	ready a	approve	ed by	the Co	ourt by
sep	oarate	orc	der or in	a pre	eviousl	y confi	rmed n	nodifie	d plan	[ECF#		: \$; E0	CF#	: \$];	
	(iii)	\$: A	ddition	nal pos	t-confii	rmatio	n fees b	eing so	ught	in thi	s mo	dified 1	plan, w	hich:	fees w	ill be

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approved when this plan is confirmed;

B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

CreditorType of PriorityEstimated ClaimPayment and TermInternal Revenue ServiceTaxes4,565.07Pro-rataL.O. Pfeiffer Jr., TreasurerTaxes1,083.00Pro-rata

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

Creditor Collateral Purchase Date Estimated Debt Bal. Replacement Value

Hyundai Finance 2013 Hyundai Sonata 4/28/2013 19204.00 15725

B. Real or Personal Property to be Surrendered. Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral. **See Paragraph 11 herein below.**

Creditor Collateral Description Estimated Value Estimated Total Claim

None

C. Adequate Protection Payments. The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor Collateral Adeq. Protection Monthly Payment To Be Paid By

Hyundai Finance 2013 Hyundai Sonata 250.00/mo for 4 mos Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan): This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Approx. Bal. Of Debt or Interest Monthly Payment Creditor Collateral "Crammed Down" Value Rate & Est. Term

Hyundai Finance 2013 Hyundai Sonata 15725 4.25% 294.00 for 56 mos

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E. Other Debts. Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

4.	Unsecured	Claims.

A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately **22.42** %. If this case were liquidated under Chapter 7, the debtor(s) estimate unsecured creditors would receive a dividend of approximately **0.00** %.

B. Separately classified unsecured claims.

Creditor Basis for Classification Treatment

None

- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5). See Paragraph 11 herein below.
 - **A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee.** The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

		Regular Contract	Estimated	Arrearage	Estimated CureMonthl	y Arrearage
Creditor	Collateral	Payment	Arrearage	Interest Rate	Period	Payment
Bank Of America	1760 Anderson Hwy	1,149.89	0.00	0.00%	n/a	n/a
Call Federal Credit Union	2011 Ford F150	579.00	0.00	0.00%	n/a	n/a

B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

Regular Contract Estimated Interest Rate MonthlyPayment on Payment Arrearage on Arrearage & Est. Term

Pro-rata

None

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

Interest Estimated Monthly
Creditor Collateral Rate Claim Payment & Term

None

- **6. Executory Contracts and Unexpired Leases.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
 - **A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor Type of Contract

Time Share Owners

Sedona Summit Resort Owners Association Association

B. Executory Contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Creditor Type of Contract Monthly Payment Estimated
Arrearage for Arrears Cure Period

None

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7.	Liens	Which	Debtor	(2)	Seek	to	Avoid.

A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor Collateral Exemption Basis Exemption Amount Value of Collateral

None

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor Type of Lien Description of Collateral Basis for Avoidance

None

8. Treatment and Payment of Claims.

- All creditors must timely file a proof of claim to receive payment from the Trustee.
- If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the plan, the creditor may be treated as unsecured for purposes of distribution under the plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
- If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the plan.
- The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- 9. Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.

11. Other provisions of this plan:

- A. Any unsecured proof of claim for a deficiency which results from the surrender and liquidation of the collateral noted in paragraph 3.B of this plan must be filed by the earlier of the following dates or such claim will be forever barred: (1) within 180 days of the date of the first confirmation order confirming a plan which provides for the surrender of said collateral, or (2) within the time period set for the filing of an unsecured deficiency claim as established by any order granting relief from the automatic say with respect to said collateral. Said unsecured proof of claim for a deficiency must include appropriate documentation establishing that the collateral surrendered has been liquidated, and the proceeds applied, in accordance with applicable state law.
- B. Any fees, expenses, or charges accruing on claims set forth in paragraph 5A or 5B of this Plan which are noticed to the debtor pursuant to Bankruptcy Rule 3002.1(c) shall not require modification of the debtor's plan to pay them. Instead, any such fees, expenses, or charges shall, if allowed, be payable by the debtor outside the Plan unless the debtor chooses to modify the plan to provide for them.

Dated: June 30, 2016	/s/ Eugene Robert Boyles				
	Debtor				
/s/ Margaret C. Valois	/s/ Ida Louise Boyles				
Debtor(s)' Attorney	Joint Debtor				

James River Legal Associates 7601 Timberlake Road Lynchburg, VA 24502 (434) 845-4529 Case 15-62078 Doc 44 Filed 06/30/16 Entered 06/30/16 16:41:05 Desc Main Document Page 5 of 13

Exhibits: Copy of Debtor(s)' Budget (Schedules I and J);

Matrix of Parties Served with plan

Certificate of Service

I certify that on June 30, 2016, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ Margaret C. Valois

Signature

James River Legal Associates 7601 Timberlake Road Lynchburg, VA 24502 (434) 845-4529 Fax: (434) 845-853

Ver. 09/17/09 [effective 12/01/09]

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Appomattox County General District Court PO Box 187
Appomattox, VA 24522-0187

Best Buy/ Capital One* PO Box 6204 Sioux Falls, SD 57117-6204

Capital One Bank* PO Box 30285 Salt Lake City, UT 84130-0285

Cmg Southside Emergency Services C/O Creditors Collection Service PO Box 1022 Wixom, WI 48393

Creditors Collection Service PO Box 21504 Roanoke, VA 24018-0152

Dick's Sporting Goods/ Synchrony Bank PO Box 965005 Orlando, FL 32896

Dominion Behavioral Healthcare C/O Receivables Management Systems PO Box 8630 Richmond, VA 23226

Eos Cca Po Box 981025 Boston, MA 02298

Fingerhut/ Web Bank PO Box 1250 St Cloud, MN 56395-1250

Hyundai Finance*
Attn: Bankruptcy
Pob 20809
Fountain Valley, CA 92708

James River OBGYN 7101 Jahnke Rd, Ste. 280 Richmond, VA 23225

L.O. Pfeiffer Jr., Treasurer Cumberland County PO Box 28 Cumberland, VA 23040 Bank Of America* Attn Bankruptcy Department PO Box 982235 El Paso, TX 79998-2235

Call Federal Credit Union* 4605 Commerce Rd Richmond, VA 23234

CMG Farmville C/O Creditors Collection Service PO Box 21504 Roanoke, VA 24018

Coulter, Dove & Harris, KPC 7900 Sudley Rd, Ste. 608 Manassas, VA 50109

Dell Financial Services*
C/O DFS Customare Care Dept
PO Box 81577
Austin, TX 78708

Discount Tire/ Synchrony Bank Po Box 965036 Orlando, FL 32896

dsgi/ Synchrony Bank PO Box 965005 Orlando, FL 32896

Farmers Bank Of Appomattox* PO Box 216 Appomattox, VA 24522-0216

Fredericksburg Cr Bur 10506 Wakeman Dr Fredericksburg, VA 22407

Internal Revenue Service* Insolvency Unit 400 N 8th St No. 76 Richmond, VA 23219

Kohls/ Capital One Attn: Bankruptcy Department PO Box 3043 Milwaukee, WI 53201-3043

Lane Bryant/ Comenity Bank* PO Box 182789 Columbus, OH 43218 Case 15-62078 Doc 44 Filed 06/30/16 Entered 06/30/16 16:41:05 Desc Main Document Page 7 of 13

Lowes/ Synchrony Bank* PO Box 965005 Orlando, FL 32896-5005 Nelnet/ Dept Of Education* 121 S 13th St Lincoln, NE 68508

Portfolio Recovery Associates LLC PO Box 41067 Norfolk, VA 23541 Prince Edward County General District Court 111 South St Farmville, VA 23901

Radiology/ Richmond 10506 Wakeman Dr Fredericksburg, VA 22407 Sedona Summit Resort Owners Association 10600 West Charleston Blvd Las Vegas, NV 89135

SpringleafFinancial Services Of America* Drew Fitzgerald, Branch Manager 105 Clarion Rd Ste K Altavista, VA 24517-1168 Virginia Department Of Taxation Legal Unit PO Box 2156 Richmond, VA 23218-2156

Virginia Emergency Physicians Po Box 981025 Boston, MA 02298

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Fill in this in	formation to identify y	our case:		
Debtor 1	Eugene Robert Bo	Dyles Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Ida Louise Boyle	Middle Name	Last Name	
United States E	Bankruptcy Court for the: W	estern District of Virginia		
Case number (If known)	15-62078		-	Check if this is: ☐ An amended filing
				A supplement showing post-petition chapter 13 income as of the following date:

Official Form 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

MM / DD / YYYY

Ľ	Describe Employm	ent							
1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse				
If you have more than one job, attach a separate page with information about additional employers.			✓ Employed☐ Not employed		✓ Employed☑ Not employed				
	Include part-time, seasonal, or self-employed work.	Occupation	Senior Correct	tional Officer	Patient Care Tech				
	Occupation may Include student or homemaker, if it applies.	Occupation	Germon Gorneon	nonai omeei	i addit oare recii				
		Employer's name	Commonwealt	<u>th of Virginia Buck</u>	DVA Renal Healthcare, Inc.				
		Number Street		PO Box 2076 Number Street					
					Tacoma, WA 98401-0000				
		How long employed there	J,	d 6 months	City State ZIP Code 15 years				
	art 2: Give Details About	Monthly Income							
	Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.								
				For Debtor 1	For Debtor 2 or non-filing spouse				
2	List monthly gross wages, sala deductions). If not paid monthly,			^{2.} \$ 3,570.30	\$ <u>3,459.2</u> 4				
3	. Estimate and list monthly over	time pay.	;	3. + _{\$} 0.00	+ \$0.00_				
4	. Calculate gross income. Add lin	ne 2 + line 3.	4	\$ <u>3,570.30</u>	\$ <u>3,459.2</u> 4				

Official Form 6I Schedule I: Your Income page 1

Debtor 1

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Eugene Robert Boyles
First Name Middle Name Last Name

Case number (if known) 15-62078

Desc Main

		For	Debtor 1		btor 2 or ng spouse	
Copy line 4 here	4.	\$	<u>3,570.3</u> 0	\$	3,459.24	
List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$	609.44	\$	591.55	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
5e. Insurance	5e.	\$	522.38	\$	219.06	
5f. Domestic support obligations	5f.	\$	0.00	\$	0.00	
•		\$	0.00	\$	0.00	
5g. Union dues	5g.			Ψ		
5h. Other deductions. Specify: See Schedule Attached		+\$	700.89	+ \$	576.42	
Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$	<u>1,310.3</u> 3	\$	1,167.97	
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,259.97	\$	2,291.27	
List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		Φ.	0.00	\$	0.00	
monthly net income.	8a.	Ψ		Ψ		
8b. Interest and dividends	8b.	\$	0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent					
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
8d. Unemployment compensation	8d.	\$	0.00	\$	0.00	
8e. Social Security	8e.	\$	0.00	\$	0.00	
8f. Other government assistance that you regularly receive						
Include cash assistance and the value (if known) of any non-cash assistant hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ice	\$	0.00	\$	0.00	
Specify:	8f.					
8g. Pension or retirement income	8g.	\$	0.00	\$	0.00	
8h. Other monthly income. Specify:	8h.	+\$	0.00	+\$	0.00	
Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	0.00	
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,259.97+	\$	2,291.27	= \$ <u>4,551.2</u>
State all other regular contributions to the expenses that you list in Sched	dula l			<u> </u>		
Include contributions from an unmarried partner, members of your household, yother friends or relatives.			ents, your room	mates, ar	nd	
Do not include any amounts already included in lines 2-10 or amounts that are	not av	/ailable	to pay expens	es listed i	n <i>Schedule J</i> .	
Specify:				_	11.	+ \$0.00
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of C				-		\$ <u>4,551.24</u>
Do you expect an increase or decrease within the year after you file this	form?	•				Combined monthly income
№ No.	_					

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IN RE Boyles, Eugene Robert & Boyles, Ida Louise

____ Case No. **15-62078**

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Continuation Sheet - Page 1 of 1

	DEBTOR	SPOUSE
Other Payroll Deductions:		
Member Retirement	178.51	0.00
Medical Reimbursement	75.83	0.00
Medical	378.08	0.00
Misc Insurance	68.14	0.00
Misc Supp Ins Fee	0.33	0.00
HCRA	0.00	208.35
401 (K) Loan	0.00	79.37
401 (K) Loan 2	0.00	77.09
Crit III	0.00	8.30
Life Dep	0.00	1.76
Life Spouse	0.00	2.41
Mandatory Uniform Payment	0.00	199.14

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-Filing
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Fill in this i	nformation to identify	our case:			
Debtor 1	Eugene Robert E	Boyles Middle Name Last Name	Check if t	his is:	
Debtor 2 (Spouse, if filing	Ida Louise Boyle First Name		———	nended filing	
United States	Bankruptcy Court for the: V	Vestern District of Virginia		plement showing post- ses as of the following	
	15-62078			DD / YYYY	,
(If known)				arate filing for Debtor 2	
Official I	Form 6J		mainta	ains a separate house	hold
Sched	lule J: You	ır Expenses			12/13
information.	_	ssible. If two married people are fili d, attach another sheet to this form			
Part 1:	Describe Your Hou	sehold			
1. Is this a joi	int case?				
No. Go		awayata hayyaahald			
	oes Debtor 2 live in a s	eparate nousenoid?			
		a separate Schedule J.			
2. Do you hav	ve dependents?	No	Dependent's relationship to	De pendent's	Does dependent live
Do not list I Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state names.	e the dependents'		Daughter	14	No Yes
names.					□ No
					☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No □ Yes
expenses	penses include of people other than nd your dependents?	▼ No □ Yes			│ 山 Yes
Part 2:	stimate Your Ongoi	ng Monthly Expenses			
		bankruptcy filing date unless you a	re using this form as a supple	ement in a Chapter 13 o	case to report
_	of a date after the ban	kruptcy is filed. If this is a suppleme	=		-
-	-	-cash government assistance if you it on Schedule I: Your Income (Office		Your expe	nses
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.			\$ 1,1 4	\$1,149.89	
-	uded in line 4:				
4a. Real	estate taxes			4a. \$ 0	.00

4b.

4d.

Property, homeowner's, or renter's insurance

Home maintenance, repair, and upkeep expenses

Homeowner's association or condominium dues

0.00

75.00

0.00

4b.

4c.

4d.

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Debtor 1

Eugene Robert Boyles
First Name Middle Name Last Name

Case number (if known) 15-62078

		You	Your expenses	
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00	
6. Utilities:				
6a. Electricity, heat, natural gas	6a.	\$	180.00	
6b. Water, sewer, garbage collection	6b.	\$	55.00	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	165.00	
6d. Other. Specify:	6d.	\$	0.00	
7. Food and housekeeping supplies	7.	\$	725.72	
8. Childcare and children's education costs	8.	\$	0.00	
9. Clothing, laundry, and dry cleaning	9.	\$	150.00	
Personal care products and services	10.	\$	50.00	
Medical and dental expenses	11.	\$	0.00	
2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	430.00	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.87	
4. Charitable contributions and religious donations	14.	\$	0.00	
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 				
15a. Life insurance	15a.	\$	0.00	
15b. Health insurance	15b.	\$	0.00	
15c. Vehicle insurance	15c.	\$	148.00	
15d. Other insurance. Specify:	15d.	\$	0.00	
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property Taxes	16.	\$	66.00	
7. Installment or lease payments:				
17a. Car payments for Vehicle 1	17a.	\$	579.00	
17b. Car payments for Vehicle 2	17b.	\$	0.00	
17c. Other. Specify:	17c.	\$	0.00	
17d. Other. Specify:	17d.	\$	0.00	
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 	18.	\$	0.00	
9. Other payments you make to support others who do not live with you.		\$	0.00	
Specify:	19.			
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.			
20a. Mortgages on other property	20 a.	\$	0.00	
20b. Real estate taxes	20b.	\$	0.00	
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00	
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00	
20e. Homeowner's association or condominium dues	20e.	\$	0.00	

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Case number (if known) 15-62078 **Eugene Robert Boyles** Debtor 1 Last Name 21. Other. Specify: Hunting/Fishing 25.00 Your monthly expenses. Add lines 4 through 21. 3,849.48 The result is your monthly expenses. 23. Calculate your monthly net income. 4,551.24 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. 23h 3,849.48 23c. Subtract your monthly expenses from your monthly income. 701.76 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. None Yes.

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